



State of New Jersey

DEPARTMENT OF HEALTH AND SENIOR SERVICES

OFFICE OF EMERGENCY MEDICAL SERVICES

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RICHARD J. CODEY
Acting Governor

FRED M. JACOBS, M.D., J.D.
Commissioner

EMERGENCY MEDICAL SERVICES FOR CHILDREN ADVISORY COUNCIL MINUTES OF MEETING May 17, 2005

Members Present: Ms. Mary Ellen Brock, Dr. Thomas Whalen, Dr. Alfred Sacchetti,
Dr. Ernest Leva, Mr. Daniel Sullivan

Members Excused: Dr. Frank Briglia, Mr. Jesus Cepero, Dr. Frank Cunningham,
Dr. Martin Diamond, Dr. Anthony Greenberg, Ms. Debra Bell,
Dr. Mary Kamienski, Ms. Carolyn Ferolito,

Introductions: Eric Hicken

Guests: Ms. Marilyn Kent

Department of Health and Senior Services: Ms. Karen Halupke, Dr. John Brennan,
Ms. Nancy Kelly-Goodstein, Mr. Eric Hicken,
Ms. Linda Woolverton

The meeting was called to order by Dr. Ernest Leva at 10:15 a.m.

Minutes from November 16, 2004 approved with correction to page one on (Ms. Marilyn Kent commented about the school nurses being involved in BIANJ Brain Injury Association of New Jersey not Dr. Mary Kamienski.)

February 15, 2005 minutes approved.

Chairperson's Report

- Dr. Leva no report.

OEMS Report:

- 2005 EMSC Conference was a major success, thanks to all who participated.
 - Eight emergency nurses received credits for attending conference
 - Options considered for next conference, Friday and Saturday or Saturday and Sunday format.
 - Moving conference from EMS week did not negatively impact attendance (approximately 200 attendees over both days)
- 2006 EMSC Conference

- NJ will host a state-wide general EMS conference in the September of 2005
 - EMSC conference can be conducted with or without the EMS awards dinner
 - Availability of funding will dictate format for 2006
 - Consideration of folding EMSC conference into the state-wide EMS conference in 2006
- A suggestion was made to supply Color-coded length based resuscitation tape (i.e., Broselow tape) to all EMS services
 - Tapes are already required by regulations for all advanced life support services
 - Would there be a benefit in supplying the tapes to basic life support services?
 - Should the tapes be supplied to all acute care hospitals as well?
 - Cost of each tape is approximately \$30.00
 - Ms. Karen Halupke to research and report at the next meeting
- Federal Funding
 - President's budget proposal eliminated EMSC funding (as well as that for the Preventive Block Grant and Trauma programs)
 - Federal legislation introduced to reauthorize funding
- Available Funding - Karen Halupke reported on the proposed OEMS budget request relating to EMSC initiatives
 - Child Care Disaster Preparedness
 - Additional train-the-trainer session
 - Replacement of emergency ID packets (tyvek bands)
 - Broselow tapes
 - Printing and distribution of triage posters and tags to school nurses
 - 250 additional school emergency medical supplies kits
 - New position for EMSC (Public Health Representative 2 for preparedness related initiatives)
- Department of Human Services – Mobile response unit for behavioral emergencies
 - Available to respond to hospitals-provides access for a variety of programs
 - Agencies information is available in both English and Spanish.
- SimMan training mannequins
 - Can healthcare agencies borrow the equipment
 - Is there a pediatric version?
 - DHSS putting together utilization guidelines

Old Business

- MEDPREP report given by Mr. Daniel Sullivan
 - TOPOFF 3 exercise went well
 - Not every municipality participated
 - An overwhelming amount of man power was needed to manage patients
 - 10% of all patients - pediatric
 - 30% of all patients pediatric @ RWJ-UH, New Brunswick
 - Needs to develop a list of pediatric specialists available state-wide for mass casualty event (MEDPREP and EMSC to work cooperatively to develop)
 - Pediatric formulary on a national level may be inadequate to treat a large pediatric population
- School Preparedness- kits
 - List has been finalized (including a par level)
 - Moving forward with pricing/purchase/distribution of kits
- Trauma Triage and Treatment Booklet – review of draft
 - Level I and level II centers have similar treatment capabilities
 - Not all Level II centers have in-house pediatric capabilities and therefore patients are transferred
 - Pediatric injuries are non-operative most times
 - Out-of-hospital advanced airway interventions not as successful as for adult patients
 - All trauma patients need to go to the closest trauma center

Meeting adjourned at 12:30

2005 Meeting Schedule

Tuesday, August 16, 2005
Tuesday, November 15, 2005

NJ Hospital Association
760 Alexander Road
Princeton
10:00 a.m.-12:00 p.m.